FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000071729

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90203 009 ***150.00

FERREY	INTERNATIONAL, INC.										
Principal Plac	e of Business	Ma	iling Address						BOIN BRAN ARON		1100 1011 1001
8130 SW 89TH CT. 8130 SW 89TH CT. MIAMI FL 33173 MIAMI FL 33173								DO NOT WRITE	IN TUIC CD	ACE	
								Date Incorporated or Qualifed	IN INIO SE	NCE.	
								08/19/1997	•		
Principal F	Place of Business	2a.	Mailing Address					4. FEI Number		Ap	plied For
21		26				_		65-0778269		No	t Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			•••		5. Certifcate of Status Desired	_ · •	8.75 A	Additional equired
City & State City & State								6. Election Campaign Financing	,	\$5.00	Na. Da
23		28	,					Trust Fund Contribution		Added t	-
Zip	Country		Zip	Cou	ntry	,		8. This corporation owes the curren	t vear Intangi	ble	
24	25	29		30				Personal Property Tax.	· <u>-</u>	Yes	□No
	9. Name and Address of Current	Regist	ered Agent					10. Name and Address of New Re	gistered Age	nt	
ADAMS, GALLINAR & IGLESIAS, P.A.					81	Name		<u> </u>			
 701 BRICKELL AVE., STE. 2150 					82 Street Address			s (P.O. Box Number is Not Acceptable	e)		
MIAMI FL 33131					83						<u>-</u>
•					84 City				FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation subminifice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								ation submits this statement for the pu's board of directors. I hereby accept t	rpose of char the appointme	iging its nt as rec	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if	anolicable (NOT	F: Ragistered	Agen	t signature r	anuired w	hen reinstating)	DATE		 - , '
12,	OFFICERS AND			13.	Ago:	it signature i	aquii eo n	ADDITIONS/CHANGES TO OFFIC		IRECTO	RS IN 1
TITLE	D		☐ DELETE	1.1 111	LE.		1.	ficer		Change	Addition
NAME	FERNANDEZ, FRANCISCO R			1.2 NA	ME		000	eller Train			
STREET ADDRESS	8130 SW 89TH CT.		1.3 STREET ADDRESS			LFT	enandez Juha F				
CITY-ST-ZIP	MIAMI FL 33173				1.4 CITY-ST-ZIP			30 Sw 89 5 Court			
TITLE	D			_	2.1 TITLE		Hi	ENANDEZ, JUAN F. 30 SW 894 COURT ANI, FL 23173		Change	Addition
NAME.	Fernandez, Marina L				22 NAME			•			
STREET ADDRESS	0.00 000 000 0T		2		2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33173			2.4 CITY-ST-ZIP							i
TITLE			☐ DELETE	DELETE 3.1 TITLE						Change	Addition
NAME	NAME		3.		3.2 NAME			-		-	
STREET ADDRESS			33 ST		3 3 STREET ADDRESS						i
CITY-ST-ZIP				3.4. Qf	3.4. CITY-ST-ZIP						
TITLE		☐ DELETE 4:		4.1 T/I	4.1 TITLE					Change	Addition
NAME				4.2 NA	ME						l
STREET ADDRESS				4.3 ST	REET	ADDRESS					
CITY-ST-ZIP	Per			4.4 CIT	4.4 CITY-ST-ZIP						
TITLE			☐ DELETE	5.1 TIT						Change	Addition
NAME				5.2 NA							ļ
STREET ADDRESS				1		ADDRESS					ļ
CiTY-ST-ZIP	·			5.4 CIT		r-zip					<u></u>
TITLE			☐ DELETE	6.1 πΓ		ł				Change	Addition Addition
NAME				6.2 NA)
STREET ADDRESS						ADDRESS					ļ
CITY-ST-ZIP				6.4 CIT	Y-ST	-ZIP					i

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is fruite and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the repeiver of tristigle empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an allachment with an address, with all other like empowered.

SIGNATURE:

OFFICER OR DIRECTOR